PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10634643

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			54		10,0.0		۱ ا	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE		OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			54 minus 20=		* 3	34		X\$ 9=		OR	X\$18=	612.00
INDEPENDENT CLAIMS			5 minus 3 =		* 2			X43=	_	OR	X86=	172.00
Мι	JLTIPLE DEPE	NDENT CLAIM P	RESENT				Ì	+145=		1	+290=	1/~
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	Ĺ	TOTAL		OR OR	TOTAL	1554.00
	C	LAIMS AS A	MENDED - PART II					TOTAL		On	OTHER	
		(Column 1)	(Column 2) (Column 3			(Column 3)	1 -	SMALL E	ENTITY	OR	SMALL	NTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	: :	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	nus *** IPLE DEPENDENT		=	$ \ $	X43=		OR	X86=	
	THOTFILL	INTATION OF IVIC	DETIPLE DEF	ENDENT	CLAIM		' [+145=		OR	+290=	
							L	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)	_	DDN.TEL		-	ADDII. I EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	01.4414	=	[X43=		OR	X86=	
	THOTFILDL	INTERIOR OF MC	CIPLE DEF	ENDENT	CLAIM		J	+145=		OR	+290=	_
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1 [X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	0.484	=	 	X43=		OR	X86≃	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +145= OR OR											+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR I	TOTAL	
***	***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											